24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)		PAGE 1 OF 1 FOR SE OF FORM 24/48
AME OF COMMITTEE (In Full)		
AMERICAN WORKING FAMILIES		FEC IDENTIFICATION NUMBER ▼
		C C00511915
M M / D D / Y Y Y Y		
Check if X 24-hour report 48-hour report New report Amends report filed on		
Full Name of Payee Sinclair Strategies		Date of Public Distribution/Dissemination
		02 19 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 80 Norfolk Street		Amount
City State	Zip Code	17000.00
Needham MA	02492	Transaction ID : SE.4416 Date of Disbursement or Obligation
Purpose of Expenditure Mailing	Category/ Type	02 12 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Of	fice Sought: X House District: 29
ADRIAN GARCIA	X Oppose	President Senate State: TX
Calendar Year-To-Date Per Election for Office Sought	17000.00 Dis	
		Other (specify) ▶
Full Name of Payee		Date of Public Distribution/Dissemination
Mailing Address		
3		Amount
City State	Zip Code	
		Date of Disbursement or Obligation
Purpose of Expenditure	Category/	Man / Dan / Yayayay
	Type	
Name of Federal Candidate	Support Of	fice Sought: House District:
	Oppose	President Senate State:
Calendar Year-To-Date	Di	sbursement For: Primary General
Per Election for Office Sought		Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures		17000.00
(h) CURTOTAL of Unitersized Independent Funerality was		
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	7 7 7
(c) TOTAL Independent Expenditures		17000.00
	•	17000.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Bud Jackson [Electron	nically Filed] Date	02 20 2016
Signature		